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**BUREAU FOR DEMOCRACY, CONFLICT, AND HUMANITARIAN ASSISTANCE (DCHA)  
OFFICE OF U.S. FOREIGN DISASTER ASSISTANCE (OFDA)****NUTRITION SECTOR UPDATE - APRIL 2009****SECTOR OVERVIEW**

USAID/OFDA supports a variety of emergency and preventive nutrition interventions in disasters and complex emergencies. USAID/OFDA nutrition programs include treatment for severe and moderate acute malnutrition; infant and young child feeding; nutrition education; and support for nutrition systems, including operational research to advance best practices and build local system and humanitarian community capacity. In Fiscal Year (FY) 2008 and to date in FY 2009, USAID/OFDA has provided more than \$55 million in nutrition assistance in 15 countries as well as on a regional basis in West Africa. During this period, USAID/OFDA introduced guidance for the U.S. Government (USG) on the use of breast milk substitutes (BMS) in emergencies, commenced new research on milk use in pastoralist communities, and supported emergency nutritional interventions.



*A community health worker helps a father feed his malnourished child at a USAID/OFDA-funded community-based therapeutic care center in Ethiopia. (Photo by Diedra Spencer, USAID)*

**ENCOURAGING BREASTFEEDING TO IMPROVE INFANT HEALTH AND NUTRITION**

During a humanitarian emergency, breast milk is the safest form of food for infants and young children, according to nutrition experts. Disaster-affected and displaced mothers frequently lack access to safe drinking water necessary for preparing BMS and cleaning implements. In addition, non-breastfed infants are more vulnerable to infection, diarrhea, dehydration, and malnutrition. Field studies indicate that non-breastfed infants face diarrheal disease mortality rates 14 times greater and acute respiratory infection mortality rates four times greater than breastfed infants.

In FY 2009, USAID/OFDA issued new internal policy guidance explaining the benefits of breastfeeding and detailing the limited circumstances when BMS is acceptable for use in USAID/OFDA-funded projects. The new guidance is intended to help USG emergency response personnel, including USAID Mission, U.S. Embassy, and U.S. Military staff, learn and employ breastfeeding best practices, including determining if BMS are acceptable and recognizing the proper methods for distributing and using BMS. In support of internationally-recognized best practices, USAID/OFDA encourages breastfeeding. In addition, USAID/OFDA policy adheres to standards in the Convention on the Rights of the Child, the Innocenti Declaration on the Protection, Promotion, and Support of Breastfeeding, and the World Health Assembly's International Code of Marketing of Breastmilk Substitutes. The new USAID/OFDA guidelines promote infant and young child health and nutrition by expanding knowledge of breastfeeding benefits.

**RESEARCHING MILK'S ROLE IN PASTORALIST COMMUNITIES**

Recurrent droughts and associated livelihood disruptions, combined with livestock disease and violent conflict, severely affect pastoralist communities in the Horn of Africa. As a result, family livestock holdings have noticeably decreased compared to 40 to 50 years ago, increasing pastoralist dependency on

cereals. Due to the staple food status of milk in pastoralist children's diets, the availability of milk is directly linked to child health and nutrition. In response to economic shocks and livelihood disruptions, coping mechanisms, such as the sale of livestock, further deplete already reduced livestock holdings, particularly negatively affecting children. SC/US notes a peak in child malnutrition when milk becomes less accessible, before the onset of the cereal shortage hunger season, demonstrating a link between livestock production and child nutrition. USAID/OFDA supports emergency nutrition programs in affected pastoralist communities as an immediate humanitarian response. In addition, USAID/OFDA supports nutritional research activities to enhance understanding of the impact of pastoralist livelihood disruption on child health and nutrition in order to improve emergency and long-term responses.

For example, in 2008, and with USAID/OFDA support, Tufts University and SC/US launched a knowledge and practices study on milk in pastoralist communities in Somali Region, Ethiopia, to examine the impact of milk production and consumption on infant and child nutrition. Building on past research, the Tufts University-SC/US study focuses on the quantity and quality of human and animal milk production, as well as milk access for different socio-economic groups. In addition, the study seeks to evaluate milk interventions with the goal of designing food assistance that reflects the importance of milk. The study aims to improve the understanding of the causes of chronically high malnutrition rates in pastoralist areas in order to prioritize interventions to improve child health and nutrition.

### **FIGHTING MALNUTRITION IN ETHIOPIA**

Chronic food insecurity in Ethiopia, resulting from consecutive seasons of failed rains, a rapidly growing population, increased inflation, endemic poverty, and limited government capacity, has necessitated USAID/OFDA nutrition interventions in FY 2008 and FY 2009. During the 2008 hunger season, the U.N. World Food Program identified malnutrition rates among adults and children above the emergency threshold, requiring additional targeted nutrition interventions.

With USAID/OFDA support, the U.N. Children's Fund (UNICEF) implemented therapeutic feeding programs (TFPs) benefiting approximately 100,000 people affected by chronic food insecurity. As part of the program, beneficiaries received ready-to-use therapeutic food from UNICEF implementing partners. In FY 2008 and to date in FY 2009, USAID/OFDA has provided more than \$12 million to support nutrition activities in Ethiopia, including health interventions designed to prevent the deterioration of nutritional levels among populations in Amhara, Oromiya, Somali, Tigray, and Southern Nations, Nationalities, and Peoples regions. USAID/OFDA and partner organizations continue to monitor the nutritional situation in vulnerable areas and provide assistance to mitigate drought effects.

### **ONGOING USAID/OFDA ACTIVITIES TO STRENGTHEN NUTRITION INTERVENTIONS:**

- **Facilitating best practices in Supplementary Feeding Program (SFP) reporting:** SFPs often fail to meet humanitarian standards and the overall impact of SFPs has been difficult to assess as a result of incomplete reporting, according to a USAID/OFDA-funded Emergency Nutrition Network (ENN) and SC/US review. In a follow-up USAID/OFDA-supported effort to improve SFP accountability and effectiveness, ENN currently facilitates two working groups to draft comprehensive SFP reporting standards and better understand reasons for beneficiary drop out. Through both SFP working groups, the ENN aims to maximize the impact of nutrition programs for affected populations during emergencies.
- **Supporting the U.N. Standing Committee on Nutrition (SCN):** With USAID/OFDA support, SCN is performing a Web site upgrade to enhance practitioner access to nutrition tools, including a resource database and SCN publications. In addition, USAID/OFDA provides funding for SCN News, a biannual journal for nutrition experts.
- **Facilitating nutrition practitioner communication through a new interactive forum:** ENN, a USAID/OFDA partner, is creating a new online forum for field nutritionists to rapidly seek and offer technical advice.